Electronic Filing System (EFS) Data Electronic Patent Application Submission USPTO Use Only

EFS ID:

12064

Application ID:

09682225

Title of Invention:

Transportable Storage with an

Autonomous Dispensing System

First Named Inventor:

Dale McBride

Domestic/Foreign Application:

Domestic Application

Filing Date:

null

Effective Receipt Date:

2001-08-08

Submission Type:

Utility Patent Filing

Filing Type:

Hall han han

new-utility

Confirmation Number:

0

Attorney Docket Number:

11909/301

Digital Certificate Holder:

cn=Monika J. Hussell, ou=Registered Attorneys, ou=Patent and

Trademark Office, ou=Department of Commerce, o=U.S.

Government, c=US

Certificate Message Digest:

4FBzyLKW/Vs0PnHrQU3wPA==

Total Fees Authorized:

\$490.0

Payment Category:

CC - Credit Card

Credit Card Number:

**********4661

Expiration Date:

07312002

Card Holder Name:

David Barnette

RAM User ID:

EFSPROD

RAM Accounting Date:

2001-08-08

RAM Sequence Number:

324760

RAM Payment Status:

RAM success

Postal Code:

25322

TRANSMITTAL FORM



Electronic Version 1.0.2

Stylesheet Version: 1.0

Attorney Docket Number:

11909/301

Transportable Storage with an Autonomous Dispensing System

First Named Inventor: Dale McBride

SUBMITTED BY

Name:

THE REAL OFFI THE

Ms. Monika J Hussell Esq.

Registration Number:

37,359

Electronic Signature

Mark: /Monika_Hussell/

Date Signed: 20010808

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I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

bibd-transmittal

McBrideapds.xml

fee-transmittal

McBridefee.xml

specification

McBride Application.xml

declaration

McBride Declaration.tif

declaration

McBride POA.tif

Attached Image File(s): McBride Declaration.tif

McBride POA.tif

Comments:

DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

	As the below named inve	entor(s), I/we declare that:			
	This declaration is directe	ed to:			
	\square	The attached application, o	r		
		Application No	, filed or	n,	
	1	as amended on		(if applicable);	
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;					
	I/ we have reviewed and amended by any amende	understand the contents of ment specifically referred to	the above-identified above;	application, including the claims, as	
	I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and				
All statements made herein of my/own knowledge are true, all statements made herein on information an belief are believed to be true, and further that these statements were made with the knowledge that willf false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and ma jeopardize the validity of the application or any patent issuing thereon.					
	FULL NAME OF INVEN	TOR(S)			
	Inventor one: Dale	McBride			
	Signature:d	le McBrude	Citizen of:Uni	ited States	
	Inventor two:				
	Signature:		Citizen of:		
	Inventor three:				
	Signature:		Citizen of:		
	Inventor four:				
	Signature:				
Ī	Additional inventors are be	eing named on	additional form(s) atta	ched hereto.	

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTC to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will var depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chie Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SENI TO: Assistant Commissioner for Patents, Washington, DC 20231.

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PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	McBride
Title	Transportable Storage
Group Art Unit	
Examiner Name	
Attorney Docket Number	11909/301

l hereby appo	oint:						
OR	ners at Customer Number	26749		26749			
	Name		Regist	ration Numbersk neems			
as my/our attorr business in the	as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.						
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Individual Na	ame						
Address							
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City			State	Zip			
Country Telephone			Fax				
I am the:			I ux I				
Tam the: X Applicant/Inventor.							
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
SIGNATURE of Applicant or Assignee of Record							
Nama	Dale McBride						
Name	Dale Moride						
Signature							
Date	107 AUG 01			tive (-) and apprised Submit multiple			
	Il the inventors or assignees of reco signature is required, see below*.	ra ot the entire interest	or ineir represent	ative(s) are required. Submit multiple			
□ *Total of	forms are submitted.						

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FEE TRANSMITTAL

Electronic Version 1.0.4

Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Small Entity

Independent Inventor

TOTAL FEES AUTHORIZED: \$ 490

BANK (CREDIT) CARD INFORMATION:

Credit Card Number:

4661

Expiration Date:

20020731

Authorized Name:

David Barnette

Billing Address:

F

25322

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	201	\$ 355

Subtotal For Basic Filing Fee: \$ 355

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 20	203	\$ 9	0	\$ 0
Independent Claims: 3	202	\$ 40	0	\$ 0
Multiple Dependent Claims	204	\$ 135		\$ 135

Subtotal For Extra Claims Fees: \$ 135